

Application Data Sheet**Application Information**

Application number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R??::

Number of CD disks::

Number of copies of CDs::

Sequence Submission::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title:: REPLACEABLE ANODE LINER FOR ION
SOURCE

Attorney Docket Number:: 247_196

Request for Early Publication:: No

Request for Non-Publication:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 8

Small Entity?:: No

Latin name::

Variety denomination name::

Petition included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers One::

Secrecy Order in Parent Appl.: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Robert
Middle Name:: E.
Family Name:: Ellefson
Name Suffix::
City of Residence:: Manlius
State or Province of Residence:: NY
Country of Residence:: US
Street of Mailing Address:: 8266 Drinkwater Lane
City of Mailing Address:: Manlius
State or Province of Mailing Address:: NY
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 13104

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Louis
Middle Name:: C.
Family Name:: Frees
Name Suffix::
City of Residence:: Manlius
State or Province of Residence:: NY
Country of Residence:: US
Street of Mailing Address:: 4636 Wisteria Circle
City of Mailing Address:: Manlius
State or Province of Mailing Address:: NY
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 13104

Correspondence Information

Correspondence Customer Number:: 20874

Representative Information

Representative Customer Number::	20874
----------------------------------	-------

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee Name:: Inficon, Inc.

Street of mailing address:: Two Technology Place

City of mailing address:: East Syracuse

State or Province of mailing address:: NY

Country of mailing address:: US

Postal or Zip Code of mailing address:: 13057